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From	Attorney Number
John S. Paniaguas	32347
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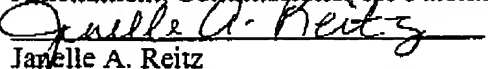
Comments

RE: Patent Application No. 10/748,078
Filing Date: December 30, 2003
Inventor: Thomas N Horsky
Title: Electron Impact Ion Source
Confirmation No.: 6882

Please file the attached:
Transmittal Form (1 p.)
Fee Transmittal (1 p.)
Amendment (4 pp.)
Petition for Extension of Time (1 p.) in duplicate
Patent Application Determination Record (1 p.)
Terminal Disclaimer (1 p.)

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Doc # CH101 (211843-00022) 50209307v1.04/04/2005/Time:9.01

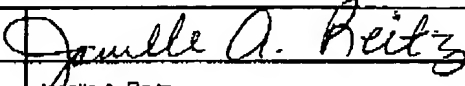
PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/748,078
	Filing Date	December 30, 2003
	First Named Inventor	Thomas N. Horsky
	Art Unit	2821
	Examiner Name	Vu, Jimmy T
Total Number of Pages in This Submission	Attorney Docket Number	211843/00022

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD <input type="checkbox"/> Remarks	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) Patent Application Fee Determination Record
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Katten Muchin Zavis Rosenman	
Signature		
Printed name	John S. Paniaguas	
Date	April 4, 2005	Reg. No. 31,051

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Signature	
Typed or printed name	Janelle A. Reitz
Date	4-4-05

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PTO/SB/17 (12-04v2)
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Effective on 12/09/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4819).

FEE TRANSMITTAL For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$575.00

Complete if Known

Application Number 10/748,078
Filing Date December 30, 2003
First Named Inventor Thomas N. Horsky
Examiner Name Vu, Jimmy T.
Art Unit 2821
Attorney Docket No 211843/00022

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number 50-1214 Deposit Account Name Katten Muchin
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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims	Extra Claims	Fee (\$)
- 20 or HP =	x	=
HP = highest number of total claims paid for, if greater than 20		
Indep. Claims	Extra Claims	Fee (\$)
- 3 or HP =	x	=
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge), Petition for Extension of Time and Terminal Disclaimer

Fees Paid (\$)

\$575.00

SUBMITTED BY

Signature John S. Paniagua Registration No 31,051 Telephone (312) 902-5200
Name (Print/Type) John S. Paniagua Date April 4, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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APR 04 2005CERTIFICATE OF TRANSMISSION

Application No.: 10/748,078
Filing Date: December 30, 2003
Inventor(s): Thomas N. Horsky
Group Art Unit: 2821
Examiner Name: Vu, Jimmy T.
Customer No.: 27160
Title: ELECTRON IMPACT ION SOURCE
Confirmation No.: 6882

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4-405 *Janelle A. Reitz*
Date Janelle A. Reitz

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Official Action dated October 5, 2004, please enter the following
Amendment.

Amendments to the Claims are reflected in the listing of claims which begins on page 2
of this paper.

Remarks/Arguments begin on page 3 of this paper.